

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER	38	10-19-94
EXAMINER	314	11-4-94
TYPIST	323	2/2
VERIFIER	211	2/3
CORPS CORR.		
SPEC. HAND	485	1-31-95
FILE MAINT.	431	11-9-94
DRAFTING		

### INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	10/1/94
2	10/1/94
3	10/1/94
4	10/1/94
5	10/1/94
6	10/1/94
7	10/1/94
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Claim	Date
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#### SYMBOLS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through number) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Best Available Copy

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